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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)						SERIAL NO. 09-747207	FILING DATE				
						APPLICANT(S)					
						CLAIMS					
AS FILED		AFTER AMENDMENT		AFTER AMENDMENT							
IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1		1				51					
2						52					
3						53					
4						54					
5						55					
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42						92					
43						93					
44						94					
45						95					
46						96					
47						97					
48						98					
49						99					
50						100					
TOTAL IND.		3				TOTAL IND.					
TOTAL DEP.		10				TOTAL DEP.					
TOTAL CLAIMS		13				TOTAL CLAIMS					

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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